



**94TH GENERAL ASSEMBLY**  
**State of Illinois**  
**2005 and 2006**  
**SB1967**

Introduced 2/25/2005, by Sen. Gary Forby

**SYNOPSIS AS INTRODUCED:**

320 ILCS 42/25

Amends the Older Adult Services Act. Provides that no later than January 1, 2006 and every January 1 thereafter, the Department on Aging and the Illinois Housing Development Authority shall file with the Governor and the General Assembly a plan that establishes goals for the number of affordable housing units to be made available to the frail elderly in the next fiscal year. Requires that the plan: (i) detail the number of new units of housing to be created, the number of units made accessible through rehabilitation and renovation, and the number of new supportive living units to be created and certified; and (ii) include recommendations for statutory or policy changes needed to reduce barriers to the establishment of affordable housing units for the frail elderly. Effective immediately.

LRB094 08053 DRJ 38236 b

FISCAL NOTE ACT  
MAY APPLY

1 AN ACT concerning aging.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Older Adult Services Act is amended by  
5 changing Section 25 as follows:

6 (320 ILCS 42/25)

7 Sec. 25. Older adult services restructuring.

8 (a) No later than January 1, 2005, the Department shall  
9 commence the process of restructuring the older adult services  
10 delivery system. Priority shall be given to both the expansion  
11 of services and the development of new services in priority  
12 service areas. Subject to the availability of funding, the  
13 restructuring shall include, but not be limited to, the  
14 following:

15 (1) Planning. The Department shall develop a plan to  
16 restructure the State's service delivery system for older  
17 adults. The plan shall include a schedule for the  
18 implementation of the initiatives outlined in this Act and all  
19 other initiatives identified by the participating agencies to  
20 fulfill the purposes of this Act. Financing for older adult  
21 services shall be based on the principle that "money follows  
22 the individual". The plan shall also identify potential  
23 impediments to delivery system restructuring and include any  
24 known regulatory or statutory barriers.

25 (2) Comprehensive case management. The Department shall  
26 implement a statewide system of holistic comprehensive case  
27 management. The system shall include the identification and  
28 implementation of a universal, comprehensive assessment tool  
29 to be used statewide to determine the level of functional,  
30 cognitive, socialization, and financial needs of older adults.  
31 This tool shall be supported by an electronic intake,  
32 assessment, and care planning system linked to a central

1 location. "Comprehensive case management" includes services  
2 and coordination such as (i) comprehensive assessment of the  
3 older adult (including the physical, functional, cognitive,  
4 psycho-social, and social needs of the individual); (ii)  
5 development and implementation of a service plan with the older  
6 adult to mobilize the formal and family resources and services  
7 identified in the assessment to meet the needs of the older  
8 adult, including coordination of the resources and services  
9 with any other plans that exist for various formal services,  
10 such as hospital discharge plans, and with the information and  
11 assistance services; (iii) coordination and monitoring of  
12 formal and family service delivery, including coordination and  
13 monitoring to ensure that services specified in the plan are  
14 being provided; (iv) periodic reassessment and revision of the  
15 status of the older adult with the older adult or, if  
16 necessary, the older adult's designated representative; and  
17 (v) in accordance with the wishes of the older adult, advocacy  
18 on behalf of the older adult for needed services or resources.

19 (3) Coordinated point of entry. The Department shall  
20 implement and publicize a statewide coordinated point of entry  
21 using a uniform name, identity, logo, and toll-free number.

22 (4) Public web site. The Department shall develop a public  
23 web site that provides links to available services, resources,  
24 and reference materials concerning caregiving, diseases, and  
25 best practices for use by professionals, older adults, and  
26 family caregivers.

27 (5) Expansion of older adult services. The Department shall  
28 expand older adult services that promote independence and  
29 permit older adults to remain in their own homes and  
30 communities.

31 (6) Consumer-directed home and community-based services.  
32 The Department shall expand the range of service options  
33 available to permit older adults to exercise maximum choice and  
34 control over their care.

35 (7) Comprehensive delivery system. The Department shall  
36 expand opportunities for older adults to receive services in

1 systems that integrate acute and chronic care.

2 (8) Enhanced transition and follow-up services. The  
3 Department shall implement a program of transition from one  
4 residential setting to another and follow-up services,  
5 regardless of residential setting, pursuant to rules with  
6 respect to (i) resident eligibility, (ii) assessment of the  
7 resident's health, cognitive, social, and financial needs,  
8 (iii) development of transition plans, and (iv) the level of  
9 services that must be available before transitioning a resident  
10 from one setting to another.

11 (9) Family caregiver support. The Department shall develop  
12 strategies for public and private financing of services that  
13 supplement and support family caregivers.

14 (10) Quality standards and quality improvement. The  
15 Department shall establish a core set of uniform quality  
16 standards for all providers that focus on outcomes and take  
17 into consideration consumer choice and satisfaction, and the  
18 Department shall require each provider to implement a  
19 continuous quality improvement process to address consumer  
20 issues. The continuous quality improvement process must  
21 benchmark performance, be person-centered and data-driven, and  
22 focus on consumer satisfaction.

23 (11) Workforce. The Department shall develop strategies to  
24 attract and retain a qualified and stable worker pool, provide  
25 living wages and benefits, and create a work environment that  
26 is conducive to long-term employment and career development.  
27 Resources such as grants, education, and promotion of career  
28 opportunities may be used.

29 (12) Coordination of services. The Department shall  
30 identify methods to better coordinate service networks to  
31 maximize resources and minimize duplication of services and  
32 ease of application.

33 (13) Barriers to services. The Department shall identify  
34 barriers to the provision, availability, and accessibility of  
35 services and shall implement a plan to address those barriers.  
36 The plan shall: (i) identify barriers, including but not

1 limited to, statutory and regulatory complexity, reimbursement  
2 issues, payment issues, and labor force issues; (ii) recommend  
3 changes to State or federal laws or administrative rules or  
4 regulations; (iii) recommend application for federal waivers  
5 to improve efficiency and reduce cost and paperwork; (iv)  
6 develop innovative service delivery models; and (v) recommend  
7 application for federal or private service grants.

8 (14) Reimbursement and funding. The Department shall  
9 investigate and evaluate costs and payments by defining costs  
10 to implement a uniform, audited provider cost reporting system  
11 to be considered by all Departments in establishing payments.  
12 To the extent possible, multiple cost reporting mandates shall  
13 not be imposed.

14 (15) Medicaid nursing home cost containment and Medicare  
15 utilization. The Department of Public Aid, in collaboration  
16 with the Department on Aging and the Department of Public  
17 Health and in consultation with the Advisory Committee, shall  
18 propose a plan to contain Medicaid nursing home costs and  
19 maximize Medicare utilization. The plan must not impair the  
20 ability of an older adult to choose among available services.  
21 The plan shall include, but not be limited to, (i) techniques  
22 to maximize the use of the most cost-effective services without  
23 sacrificing quality and (ii) methods to identify and serve  
24 older adults in need of minimal services to remain independent,  
25 but who are likely to develop a need for more extensive  
26 services in the absence of those minimal services.

27 (16) Bed reduction. The Department of Public Health shall  
28 implement a nursing home conversion program to reduce the  
29 number of Medicaid-certified nursing home beds in areas with  
30 excess beds. The Department of Public Aid shall investigate  
31 changes to the Medicaid nursing facility reimbursement system  
32 in order to reduce beds. Such changes may include, but are not  
33 limited to, incentive payments that will enable facilities to  
34 adjust to the restructuring and expansion of services required  
35 by the Older Adult Services Act, including adjustments for the  
36 voluntary closure or layaway of nursing home beds certified

1 under Title XIX of the federal Social Security Act. Any savings  
2 shall be reallocated to fund home-based or community-based  
3 older adult services pursuant to Section 20.

4 (17) Financing. The Department shall investigate and  
5 evaluate financing options for older adult services and shall  
6 make recommendations in the report required by Section 15  
7 concerning the feasibility of these financing arrangements.  
8 These arrangements shall include, but are not limited to:

9 (A) private long-term care insurance coverage for  
10 older adult services;

11 (B) enhancement of federal long-term care financing  
12 initiatives;

13 (C) employer benefit programs such as medical savings  
14 accounts for long-term care;

15 (D) individual and family cost-sharing options;

16 (E) strategies to reduce reliance on government  
17 programs;

18 (F) fraudulent asset divestiture and financial  
19 planning prevention; and

20 (G) methods to supplement and support family and  
21 community caregiving.

22 (18) Older Adult Services Demonstration Grants. The  
23 Department shall implement a program of demonstration grants  
24 that will assist in the restructuring of the older adult  
25 services delivery system, and shall provide funding for  
26 innovative service delivery models and system change and  
27 integration initiatives pursuant to subsection (g) of Section  
28 20.

29 (19) Bed need methodology update. For the purposes of  
30 determining areas with excess beds, the Departments shall  
31 provide information and assistance to the Health Facilities  
32 Planning Board to update the Bed Need Methodology for Long-Term  
33 Care to update the assumptions used to establish the  
34 methodology to make them consistent with modern older adult  
35 services.

36 (b) No later than January 1, 2006 and every January 1

1 thereafter, the Department on Aging and the Illinois Housing  
2 Development Authority shall file with the Governor and the  
3 General Assembly a plan that establishes goals for the number  
4 of affordable housing units to be made available to the frail  
5 elderly in the next fiscal year. The plan shall detail the  
6 number of new units of housing to be created, the number of  
7 units made accessible through rehabilitation and renovation,  
8 and the number of new supportive living units to be created and  
9 certified. The plan shall also include recommendations for  
10 statutory or policy changes needed to reduce barriers to the  
11 establishment of affordable housing units for the frail  
12 elderly.

13 (Source: P.A. 93-1031, eff. 8-27-04.)

14 Section 99. Effective date. This Act takes effect upon  
15 becoming law.